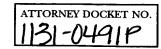
NTF02-0002 (FPJT091) US 1/2 BIRCH, STEWART, KOLASCH & BIRCH, LLP

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050



PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I

<u>.</u>	verily believe that I am the original, first (if plural inventors are named below) of	and sole inventor (if only one the subject matter which is claim	inventor is named below) or an originated and for which a patent is sough	inal, first and joint inventor it on the invention entitled:			
Insert Title:	FILTER ASSEMBLY FO	R A CIGARETTE	AND METHOD OF PRO	DUCING SAME			
	the specification of which is attached here	to. If not attached hereto,					
Fill in Appropriate Information - For Use Without Specification Attached:	the specification was filed on			as			
	United States Application Num	iber					
	and amended on		(if app	olicable); and/or			
	the specification was filed on			as PCT			
	International Application Number	ber		; and was			
	amended on			_ (if applicable)			
	by any amendment referred to above. I acknowledge the duty to disclose it §1.56. I do not know and do not believe the thereof, or patented or described in any prior to this application, that the same was application, that the invention has not be application in any country foreign to the more than twelve months (six months for on this invention has been filed in any country invention has been filed in any country foreign to the country foreign as follows: I hereby claim foreign priority benefit or inventor's certificate listed below and	information which is material to me same was ever known or user printed publication in any court is not in public use or on sale it ween patented or made the sub United States of America on any designs) prior to this application to the United States of the United States also identified below any	n the United States of America more ject of an inventor's certificate issue application filed by me or my legal tion, and that no application for pate States of America prior to this applicates Code, \$119 (a)-(d) of any foreign application for patent or in	ode of Federal Regulations, before my or our invention reof or more than one year than one year prior to this led before the date of this drepresentatives or assigns ent or inventor's certificate- ication by me or my legal			
	a filing date before that of the application on which priority is claimed:						
Insert Priority	Prior Foreign Application(s)			Priority Claimed			
Information:	2001-162884	Japan	05/30/2001				
(if appropriate)	(Number)	(Country)	(Month / Day / Year Filed)	Yes No			
		TATE OF THE STATE					
	(Number)	(Country)	(Month / Day / Year Filed)	Yes No			
	(Number)	(Country)	(Month / Day / Year Filed)	<u> </u>			
	(2.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	(,)	(Manuary Buy 7 Tour Fried)	Yes No			
	(Number)	(Country)	(Month / Day / Year Filed)	Yes No			
Insert Provisional Application(s):	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.						
	(Application Number)			(Filing Date)			
	(Application Number)			(Filing Date)			
	All Foreign Applications, if any, for any the Filing Date of this Application:	Patent or Inventor's Certificat	e Filed more than 12 months (6 mo	onths for designs) Prior to			
Insert Requested Information:	Country	Applie	cation Number Date o	of Filing (Month / Day / Year)			
nsert Prior U.S.	I hereby claim the benefit under Title 35, insofar as the subject matter of each of the in the manner provided by the first parage which is material to patentability as defifling date of the prior application and the PCT/JP02/04674	e claims of this application is r graph of Title 35, United State and in Title 37, Code of Fede	not disclosed in the prior United States States Code, §112, I acknowledge the dueral Regulations, §1.56 which beca	es and/or PCT application ty to disclose information			
Application(s):	(Application Number)	(Filing Date)		pending, abandoned)			
•							
	(Application Number)	(Filing Date)	(Status - natented	nending shandoned)			

I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners. unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

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BIRCH, STEWART, KOLASCH & BIRCH, LLP or CUSTOMER NO. 2292 P.O. Box 747 • Falls Church, Virginia 22040-0747

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

YOU MUST COMPLETE THE FOLLOWING:							
Full Name of First or Sole Inventor:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
Insert Name of Inventor Insert Date This Document is Signed	Yoichiro	YAMASHITA	Yoichiro Y	amashi to	•		
Insert Residence	Residence (City, St	ate & Country)		CITIZENSH			
Insert Citizenship	Tokyo, Japan Japanese						
Insert Mailing Address	MAILING ADDRESS (Complete Street Address including City, State & Country) C/O JAPAN TOBACCO INC., 17-7, Yokokawa, 1-chome,: Sumida-ku, Tokyo 130-8603, Japan						
Full Name of Second	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE	<u> </u>	DATE*		
Inventor, if any:	Shichisei		Shichisei	Jani	09/26/2003		
see above	Residence (City, Sta	ate & Country)		CITIZENSH	IIP		
	Tokyo, Ja	_		Japa	nese		
	MAILING ADDRESS (Complete Street Address including City, State & Country) c/o JAPAN TOBACCO INC., 17-7, Yokokawa 1-chome, Sumida-ku, Tokyo 130-8603, Japan						
Full Name of Third Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
arronos, ir ally	Toshiaki [©]	OKUZ'AWA	Toshiaki () KUZAWA	09/26/2003		
see above	Residence (City, Sta	**		CITIZENSH	IIP		
·	Tokyo, Ja	=		Japa	nese		
	MAILING ADDRESS (Complete Street Address including City, State & Country) c/o JAPAN TOBACCO INC., 17-7, Yokokawa 1-chome, Sumida-ku, Tokyo 130-8603. Japan						
Full Name of Fourth Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
<u>.</u>							
see above	Residence (City, Sta	ate & Country)	-	CITIZENSH	IP		
	MAILING ADDRESS	(Complete Street Address inc	cluding City, State & Country)	L			
Full Name of Fifth	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
Inventor, if any	·				<i>5,</i> (12		
see above	Residence (City, State & Country) CITIZENSHIP						
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Page 2 of 2 (Revised 01/02)							
	* DATE OF SIGNATUR	RE					